

DBH Evidence-Based Practices (EBP) Fact Sheet

EBP Service: Child Parent Psychotherapy (CPP)

Description	Child Parent Psychotherapy (CPP) is a therapeutic intervention for young children with a history of trauma exposure or maltreatment			
	and their caregivers. CPP supports child development, restores the child-parent relationship and the overall feelings of safety, while			
	reducing symptoms associated with the experience	reducing symptoms associated with the experience of trauma.		
Age & Delivery Setting	Ages range from 0-6 years old	Ages range from 0-6 years old		
	Delivery Setting: Adoptive Home, Birth Family Home, Foster Home, and Outpatient Clinic			
Inclusionary Criteria	Child Victims or witnesses of:			
	family violence	family violence		
	intimate partner violence			
	child physical abuse			
	child sexual abuse			
Exclusionary Criteria	Child:			
	does not have a trauma or maltreatment history			
	does not have a significant caregiver participating in treatment			
Treatment	Average length/number of sessions: 50 sessions or approximately one year			
Duration/Rate				
	Provider Co	ontact Information		
	Fibridei	ontact information		
DBH PIECE Program		Mary's Center		
	821 Howard Road SE 2333 Ontario Road NW			
Washington, DC 20020 Washington, DC 20009				
(202) 698-1838 (202) 483-8319				
	Ward: 8 Ward: 1			
· ·	Insurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst Insurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted			
(Trusted Health), Medicaid, HSCSN Health), Medicaid, HSCSN				

EBP Service: Parent Child Interaction Therapy (PCIT)

Description	PCIT is a supported treatment for young children who are experiencing extreme behavioral difficulties. It places emphasis on			
•	improving the quality of the parent-child relationship and changing parent-child interaction patterns.			
Age & Delivery	Ages range from 2-6 years old			
Setting	Delivery Setting: Outpatient Clinic			
Inclusionary Criteria	Child who exhibits:			
, , , , , , , , , , , , , , , , , , , ,	loss of temper			
	• property destruction			
	• stealing			
	• fighting			
	general difficulty playing appropriately			
	Child must live with one or both parents or in a stable foster home			
	Children must be a resident or ward of the District of Columbia			
Exclusionary Criteria	Child is diagnosed with:			
•	Autism			
	Persistent Developmental Disorder (PDD)			
	exclusive Attention-Deficit/Hyperactivity Disorder (ADHD)			
	Children whose parents have sexually abused their children (or convicted of such a crime) or who have an active investigation			
	pending are not eligible for PCIT			
	Parents with active substance abuse (should be referred for substance abuse treatment before being referred for PCIT)			
	Parents with an IQ below 70			
Treatment	Child and caregiver participate in a series of therapy sessions: approximately 25 to 30 sessions (6-7 months)			
Duration/Rate				
	Provid	der Contact Information		
	DBH PIECE Program Mary's Center			
821 Howard Road SE		2115 Ontario Road NW		
Washington, DC 20020		Washington, DC 20009		
(202) 698-1838		(202) 483-8319		
Ward: 8		Ward: 1		
Insurance Accepted:		Insurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted Health),		
AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted Health),		Medicaid, HSCSN		
	Medicaid, HSCSN			

EBP Service: Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

Description	TF-CBT is an intervention designed to help children, youth, and their parents overcome the negative effects			
	of traumatic life events and address feelings.			
Age & Delivery Setting	Ages range from 3-18 years old.			
	Delivery Setting: Adoptive Home, Birth Family F	Home, Foster Home, and Outpatient Clinic		
Inclusionary Criteria	Child/Youth who have a history of at least one	significant potentially traumatic event to include but not		
	limited to:			
	sexual assault			
	physical assault			
	witnessing serious violence in the home or community			
	 unexpected traumatic death of a loved 	one		
	motor vehicle accident			
	dog attack			
	exposure to disasters			
	exposure to terrorist attacks			
	exposure to war trauma			
Exclusionary Criteria	Child/Youth:			
	does not have a trauma history			
	 does not have a significant mental health symptom(s) related to a traumatic event 			
	has severe cognitive disabilities, autism spectrum disorder			
	has other difficulties that make it impossible for them to engage in cognitive therapy			
Treatment Duration/Rate	Children participate in a series of approximately 16 to 24 therapy sessions (4-6 months)			
	Provider Contact Information			
Maryland Family Resource	Hillcrest Children and Family Center	Latin American Youth Center		
903 Brightseat Road	915 Rhode Island Ave NW	1419 Columbia Road NW		
Landover, MD 20785	Washington, DC 20001	Washington, DC 20009		
(301) 333-2980	(202) 232-6100	(202) 319-2225		
Ward: N/A	Ward: 2	Ward: 1		
317 F Street NE	3029 Martin Luther King, Jr. Ave SE	Accepted insurance:		
Suite 101 &102	Washington, DC 20032	AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted		
Washington, DC 20002	Phone: (202) 232-6100	Health), Medicaid, HSCSN		
202-544-1040	Ward: 8			
Ward: 6				
Insurance Accepted: AmeriHealth, Medstar	Insurance Accepted: AmeriHealth, Medstar			
(Amerigroup), Carefirst (Trusted Health),	(Amerigroup), Carefirst (Trusted Health),			
Medicaid, HSCSN	Medicaid, HSCSN			

EBP Service: Trauma Systems Therapy (TST)

Description	TST is a comprehensive model for treating traumatic stress in children and adolescents that adds to individually-based approaches by specifically addressing the child's social environment and/or system of care. TST is designed to provide an integrated and highly coordinated system of services guided by the specific understanding of the nature of child traumatic stress. TST focuses on the interaction between the child's difficulties regulating their emotions and the deficits within the child's social			
	environment.			
Age & Delivery Setting	Ages range from 6-18 years old.			
		Delivery Setting: TST is a planning approach that includes input from children's homes, schools, community.		
Inclusionary Criteria	Child/Youth/Young Person has:			
	been exposed to trauma			
plausible trauma historiesevidence of difficulty regulating				
			 emotional and behavioral states 	
	dysregulation being plausibly related to the trauma history			
	 stable housing or a plan to achieve stable housing in the community 			
Exclusionary Criteria	tions and service settings. Therefore, exclusionary criteria will be determined at the			
	clinical discretion of the team at each provi	scretion of the team at each provider site.		
Treatment Duration/Rate	Average length of stay is 9-18 months			
	Provide	r Contact Information		
Mary	land Family Resource	Hillcrest Children and Family Center		
90	03 Brightseat Road	915 Rhode Island Ave NW		
La	ndover, MD 20785	Washington, DC 20001		
(301) 333-2980		(202) 232-6100		
Ward: N/A		Ward: 2		
317 F Street NE		3029 Martin Luther King, Jr. Ave SE		
Suite 101 &102		Washington, DC 20032		
Washington, DC 20002		Phone: (202) 232-6100		
202-544-1040		Ward: 8		
	Ward: 6			
Insurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst		Insurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted		
(Trusted Health), Medicaid, HSCSN		Health), Medicaid, HSCSN		

EBP Service: Functional Family Therapy (FFT)

Description	FFT is a family focused intervention for at-risk and	juvenile justice involved youth.		
Age & Delivery Setting	Ages range from 11-18			
	Delivery Setting: Adoptive Home, Birth Family Home, Foster Home, and Outpatient Clinic.			
Inclusionary Criteria	Child/Youth and their families whose range of problems include but are not limited to:			
	acting out			
	conduct disorder			
	alcohol and/or substance abuse			
	limited access to resources			
Exclusionary Criteria	• a range of diagnoses **Clusionary Criteria Child/Youth who is			
	 actively suicidal 			
	 actively homicidal 			
	actively psychotic without medication stabilization			
	in respite or emergency care			
	not returning home within 30 days			
	not living with permanent/long-term caregiver			
Treatment Duration/Rate	Families participate in a series of sessions over a 3	-5 month treatment period		
	Provider Contact Information			
Parent & A	dolescent Support Services (PASS)	Better Morning		
DC Department of Hu	man ServicesFamily Services Administration	2041 Martin Luther King Jr. Avenue SE		
	64 New York Ave NE	Suite 109		
Washington, DC 20002		Washington, DC 20020		
(202) 698-4334		(202) 536-4414		
Ward: 5		Ward: 8		
Insurance Accepted: N/A				
		4545 42 ND Street NW		
		Suite 105		
		Washington, DC 20007		
		(202) 536-4414		
		Ward: 3		
		Insurance Accepted:		
		Magellan, Amerihealth, Medstar (Amerigroup), Carefirst (Trusted Health),		
Medicaid, HSCSN				

EBP Service: Multi-Systemic Therapy (MST)

Description	MST is an intensive community-based treatment for youth and their families. Emphasis is on empowering parents/caregivers to			
	assist youth in making and sustaining change in individual, family, peer, and school systems.			
Age & Delivery Setting	Ages range from 12-17			
1.60 0. 2 0	Delivery Setting: Adoptive Home, Birth Family Home, and Outpatient Clinic.			
Inclusionary Criteria	Child/Youth:			
,	 has antisocial behaviors putting them at risk of out of home placement 			
	 is living with or returning to a parent/caregiver with whom the youth has a long-term relationship and who is willing to 			
	participate in treatment			
	 must have a diagnosis 			
	 must reside in the District or be living close to the District with active District Medicaid. 			
	 must be in the home within 30 days of admission 			
Exclusionary Criteria	Child/Youth who			
Exclusional y enteria	has current active psychosis or autism diagnosis			
	 has been in residential treatment longer than 12 months immediately prior to MST 			
Treatment Duration/Rate				
Treatment Buration, Nate				
	Provider Contact Information			
	MBI Services LLC			
	2041 Martin Luther King Jr. Ave SE			
Suite 239				
	Washington, DC 20020			
(202) 547-8450				
Ward: 8				
I	nsurance Accepted: AmeriHealth, Medstar (Amerigroup), Carefirst (Trusted Health), Medicaid, HSCSN			

EBP Service: Transition to Independence Process (TIP)

Description	TIP is a practice model which prepares youth and young adults with emotional and behavioral challenges for the transition to adult roles by engaging them in their own futures planning while providing developmentally-appropriate supports. TIP involves youth/young adults, their families, and other key players in a process that facilitates movement towards greater self-sufficiency and successful achievement of their goals.			
Age & Delivery Setting	Age ranges from 14-29 years Delivery Setting: Family's natural environment-homes, schools, and community.			
Inclusionary Criteria	Youth/ Young Person: • with emotional and behavioral difficultly			
Exclusionary Criteria	Youth/ Young Person:			
	with no emotional and l	with no emotional and behavioral difficulty		
Treatment Duration/Rate	12 to 36 months	12 to 36 months		
	Provider Contact Information			
MBI Services LLC	Life Enhancement Services	Community Connections	Parent & Adolescent Support	Wayne Place,
4130 Hunt Place NE	1818 New York Ave NE	801 Pennsylvania Ave SE	Services (PASS)	121 Wayne Place SE
Washington DC 20019	Suite 115	Washington DC 20003	DC Department of Human	Washington DC 20032
(202) 547-8450	Washington, DC 20002	(202) 546-1512	Services-Family Services	(202) 506-1094
Ward: 8	(202) 269-2401	Ward: 6	Administration	Ward: 8
Insurance Accepted:	Ward: 5	Insurance Accepted:	64 New York Ave NE	Insurance Accepted: N/A
AmeriHealth, Medstar	Insurance Accepted:	Medicaid	Washington, DC 20002	
(Amerigroup), Carefirst	AmeriHealth, Medstar		(202) 698-4334	
(Trusted Health),	(Amerigroup), Carefirst		Ward: 5	
Medicaid, HSCSN	(Trusted Health), Medicaid, HSCSN		Insurance Accepted: N/A	